

### Cooperation between clinic and community when planning and delivering Secondary Prophylaxis

Even a small deviation from a routine can throw a medication schedule off track. For people with RHD, events such as school holidays, sorry business, and ceremony can negatively impact on adherence to Secondary Prophylaxis.

Missing a dose of any required medication is not ideal. For 5-14 year-old children with ARF/RHD, not receiving any LAB injections for 4-6 weeks during the school holidays means an increased risk of a recurrence of ARF. This can lead to further heart damage, and progression of RHD.

Some clinics have implemented a few simple strategies to ensure these children get their needles:

- Give opportunistic LABs in the week before school holidays
- Ask where children will be spending the school holidays, and liaise with other clinics
- Ensure patients are registered on MeHR / PCeHR to make it easier to check if they have had their LAB at another clinic, and vice versa
- Give small incentives if children self-present to clinic for LAB
- Have several reminder systems in place (give appointment cards, set mobile phone reminder, call parent/guardian)



Photo: Gunbalanya

Some clinics have reported that it can be a challenge to deliver LABs or get patients to come to the clinic whilst sorry business or ceremonies are occurring in the community. Clinic staff are conscious not to disturb community members during this time.

In one community, a community Elder became aware that children were missing their LAB injections due to ceremonial business. He then facilitated – in cooperation with health workers - the children receiving their needles. Building relationships with local Elders can make the health centre more accessible.

*Sharing success stories:  
Laynhapuy homelands clinic achieved  
100% adherence during Jan-March 2015.  
Well done to all staff and patients.*

### Issue 4

July 2015

**Welcome** to the fourth newsletter from the Improving Secondary Prophylaxis (SP) for Rheumatic Heart Disease (RHD) research project. In our quarterly newsletter we share stories from participating health centres: What works in their community, how they are improving their processes for RHD care, and how the project is supporting their work.

### What is the project about?

Our project is titled 'Improving delivery of Secondary Prophylaxis for Rheumatic Heart Disease.' The aim of our study is to assist health centres to maximise efforts to deliver Secondary Prophylaxis.

### What do we do?

We are implementing a package of activities to optimise clinical care and quality improvement in NT health centres to increase adherence to SP.

Our project team visits each participating clinic 2-3 times during the beginning of the project to learn about SP processes. Together with clinic staff we develop a tailored Action Plan which includes a variety of activities, all designed to improve SP delivery. We then visit each clinic monthly for 15 months, to support the staff to implement their Action Plan.

### What is our goal?

If successful, the activity package we are testing could be used by health centres across the NT and beyond - which would hopefully see significant reductions in Acute Rheumatic Fever recurrence rates and severity, and prevalence of RHD.

### Who do we work with?

We are working with ten health centres across the NT, in collaboration with the NT RHD Control Program, RHD Australia and other stakeholders.



Photo (L to R): Jane Poole, Felicity Dennis, Chris Chamberlain, Cynthia Brock

In the preparation for the event DDHS and our project liaised closely with the NT RHD Control Program and RHD Australia. The result was a well-resourced and equipped stall that generated interest from health professionals and members of the public who stopped to look at audio-visual material and engaged in conversation about ARF and RHD. Danila Dilba's new T-shirt design also caught the attention of many shoppers. RHD Register Coordinator Chris Chamberlain was delighted to attend the event, and to support the DDHS team. Colleagues from the DDHS Chronic Disease Team and RHD Australia also stopped by during the day to show their support. If you and your team are interested in planning your clinic's own ARF / RHD awareness or promotional activity, please contact our Project Officer Jane for advice and helpful tips ([jane.poole@menzies.edu.au](mailto:jane.poole@menzies.edu.au)).



## Danila Dilba Health Services organises RHD Health Promotion event

Danila Dilba Health Service's (DDHS) RHD team with support from our Project Officer Jane organised a RHD Health Promotion & Awareness stall at Casuarina Square (local shopping centre in Darwin) in May.

This activity is part of the DDHS action plan to improve Secondary Prophylaxis.

## A big 'Thank You' to Oral Health Services NT

We would like to thank Oral Health Services NT for providing our project with 400 toothbrushes. Our Project Officers are taking the toothbrushes to our participating clinics to give to people receiving LAB injections for ARF/RHD.

Poor oral hygiene, dental and gum disease can lead to bacteraemia, which increases the risk of infective endocarditis. People with RHD have an increased risk of endocarditis; 1 in 5 people with endocarditis die.

You can learn more about RHD and Oral Health in the RHD Australia online learning module.  
Link: [RHD Australia online module RHD & Dental Care](#)



Photo: Jules from the Tiwi Islands

**Key Contact: Kerstin Bycroft**  
Project Coordinator  
Menzies School of Health Research  
Email: [kerstin.bycroft@menzies.edu.au](mailto:kerstin.bycroft@menzies.edu.au)  
Phone: 08 8946 8642

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